FOND DU LAC LUTHERAN HOME 244 NORTH MACY STREET

FOND DU LAC 54935 Phone: (920) 921-9520		Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/03):	150	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	150	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	145	Average Daily Census:	147

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/03)	Length of Stay (12/31/03)	용
Home Health Care	No			Age Groups	ે ક		18.6
Supp. Home Care-Personal Care	No						41.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.1	More Than 4 Years	25.5
Day Services	No	Mental Illness (Org./Psy)	21.4	65 - 74	3.4		
Respite Care	Yes	Mental Illness (Other)	4.1	75 - 84	33.8		85.5
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.5	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.2	Full-Time Equivalent	
Congregate Meals	No	Cancer	3.4			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	9.0		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	14.5	65 & Over	97.9		
Transportation	No	Cerebrovascular	4.8			RNs	7.9
Referral Service	Yes	Diabetes	6.2	Gender	용	LPNs	6.5
Other Services	Yes	Respiratory	2.8			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	33.8	Male	18.6	Aides, & Orderlies	42.9
Mentally Ill	No			Female	81.4		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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Method of Reimbursement

		Medicare !itle 18			edicaid itle 19			Other			Private Pay			amily Care			Managed Care	l 		
Level of Care	No.	00	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	્ર	Per Diem (\$)	No.	٥ŀ	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	11	100.0	268	75	92.6	116	0	0.0	0	48	100.0	147	0	0.0	0	5	100.0	116	139	95.9
Intermediate				6	7.4	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	4.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	.j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	11	100.0		81	100.0		0	0.0		48	100.0		0	0.0		5	100.0		145	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	tions, Services, an	d Activities as of 12,	/31/03
Deaths During Reporting Period		 			% Needing		Total
Percent Admissions from:		 Activities of	%		3	% Totally	Number of
Private Home/No Home Health	12.6	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health			0.0		69.7	30.3	145
Other Nursing Homes	12.6	Dressing	9.7		77.2	13.1	145
Acute Care Hospitals	66.0	Transferring	22.8		60.7	16.6	145
Psych. HospMR/DD Facilities	0.0	Toilet Use	16.6		64.1	19.3	145
Rehabilitation Hospitals	0.0		53.1			10.3	145
Other Locations	8.7	******	*****	*****	*****	****	*****
otal Number of Admissions	103	Continence		%	Special Treatmen	ts	%
ercent Discharges To:		Indwelling Or Extern	al Catheter	2.1	Receiving Resp	iratory Care	4.8
Private Home/No Home Health	19.8	Occ/Freg. Incontinen	t of Bladder	33.1	Receiving Trac		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	it of Bowel	20.7	Receiving Suct	ioning	0.0
Other Nursing Homes	6.6	_			Receiving Osto	my Care	0.7
Acute Care Hospitals	9.4	Mobility			Receiving Tube	Feeding	0.7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	0.7	Receiving Mech	anically Altered Diets	17.9
Rehabilitation Hospitals	0.0	 			_	_	
Other Locations	13.2	Skin Care			Other Resident C	haracteristics	
Deaths	50.9	With Pressure Sores		4.1	Have Advance D	irectives	85.5
otal Number of Discharges		With Rashes		4.8	Medications		
(Including Deaths)	106				Receiving Psyc	hoactive Drugs	58.6

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	Nonj	profit	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.0	94.0	1.04	87.2	1.12	88.1	1.11	87.4	1.12
Current Residents from In-County	86.9	77.2	1.13	78.9	1.10	69.7	1.25	76.7	1.13
Admissions from In-County, Still Residing	42.7	23.9	1.79	23.1	1.85	21.4	1.99	19.6	2.17
Admissions/Average Daily Census	70.1	101.9	0.69	115.9	0.60	109.6	0.64	141.3	0.50
Discharges/Average Daily Census	72.1	102.4	0.70	117.7	0.61	111.3	0.65	142.5	0.51
Discharges To Private Residence/Average Daily Census	14.3	39.2	0.36	46.3	0.31	42.9	0.33	61.6	0.23
Residents Receiving Skilled Care	95.9	96.3	1.00	96.5	0.99	92.4	1.04	88.1	1.09
Residents Aged 65 and Older	97.9	97.2	1.01	93.3	1.05	93.1	1.05	87.8	1.12
Title 19 (Medicaid) Funded Residents	55.9	64.2	0.87	68.3	0.82	68.8	0.81	65.9	0.85
Private Pay Funded Residents	33.1	25.9	1.28	19.3	1.71	20.5	1.61	21.0	1.58
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00
Mentally Ill Residents	25.5	38.5	0.66	39.6	0.64	38.2	0.67	33.6	0.76
General Medical Service Residents	33.8	20.1	1.68	21.6	1.57	21.9	1.54	20.6	1.64
Impaired ADL (Mean)	49.0	51.0	0.96	50.4	0.97	48.0	1.02	49.4	0.99
Psychological Problems	58.6	53.0	1.11	55.3	1.06	54.9	1.07	57.4	1.02
Nursing Care Required (Mean)	4.1	7.7	0.54	7.4	0.56	7.3	0.57	7.3	0.56